



Benefits Enrollment Guide 2026 Plan Year



CHOOSE SIMPLY. LIVE HAPPY.

Murray State University offers a comprehensive benefits program to all regular, full-time employees including, but not limited to, health, dental, vision, tax-exempt spending accounts, life insurance and additional voluntary benefits. This Benefits Guide includes more detail about your choices.

Important Note about your Benefit Enrollment

It is your responsibility to ensure that you have enrolled in your desired benefits plans and enrolled your eligible dependents, such as your spouse and/or children, during your enrollment period. It is recommended that you review, save and/or print the Benefit Detail Report available at the end of the enrollment workflow in Benefitfocus, the online enrollment platform. If you are declining Murray State's health insurance, you should complete the online enrollment process to decline medical and review your options for other benefits.

This benefits guide contains only highlights of the major provisions of the benefit program of Murray State University. Legal documents describe the plans in complete detail and govern their operation. If there is any disagreement between this guide and any legal document, the terms of the legal document always govern. Murray State University reserves the right to change, suspend or end benefit plans at any time.

*This communication represents a brief summary of the various benefits available to you and is provided for reference only. The actual policies issued by the Insurance carrier determine coverage and contain exclusions, limitations, full coverage terms, conditions and requirements. Any notices included in this document do not replace an Employer's requirement for communication.

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CONTACT INFORMATION



Medical Anthem

Group #: W29861 1-844-728-7612 www.anthem.com

Pharmacy

Express Scripts

Group #: GORACER 1-888-736-7499 www.express-scripts.com

Know Your Rx

1-855-218-5979 KYRX@uky.edu www.kyrx.org

Dental

Delta Dental of KY

Group #: 703520 1-800-955-2030 www.deltadentalky.com

Vision

Anthem

Group #: W29861 1-844-728-7612 www.anthem.com

Flexible Spending Account (FSA)

HealthEquity - EZ Receipts 1-877-924-3967

www.healthequity.com

Health Savings Account (HSA) HealthEquity

1-866-346-5800 www.healthequity.com

Emergency Medical

Transportation MASA

1-800-643-9023

www.masaaccess.com/member ambulanceclaims@masaglobal.com

Short Term Disability

Voya

Group #: 70222-6 1-800-955-7736 www.voya.com

Life and AD&D Insurance

Voya

Group #: 70222-6 1-800-955-7736 www.voya.com

Accident, Critical Illness & Hospital Indemnity Voya

Group #: 70222-6 1-800-955-7736 www.voya.com

Employee Assistance

Program (EAP) Wayne Corporation

1-502-451-8262 1-800-441-1327 www.waynecorp.com

Kentucky Employees Retirement System KPPA/KERS

1-502-696-8800 1-800-928-4646 www.kyret.ky.gov

Teachers Retirement System TRS

1-502-848-8500 1-800-618-1687 www.trs.ky.gov

TIAA-CREF

1-980-867-6759
National Call Center
1-800-842-2252
www.tiaa.org/public/tcm/
murraystateuniversity.com

Corebridge Financial

AIG/VALIC

1-270-925-2558 1-270-207-8592

www.corebridgefinancial.com

VOYA(ING)

1-800-343-0860 https://enroll.voya.com

Fidelity Investments

1-800-343-0860 www.netbenefits.com/ready2enroll. com



MOBILE APPS

Put your smartphone to work! Download these free apps from Google Play or Apple Store.

Benefitfocus



Access your benefits

Use this app anytime to:

- View coverage details, account balances and ID cards on the go
- Snap and tap to upload required documentation
- Understand your recent health care usage, claims, and costs

Sydney



Healthcare made easy

Use this app anytime to:

- · Search for care when and where you need it
- · View and use digital ID cards
- Find out what's covered
- Track your claims

HealthEquity

HSA details on the go

Use this app anytime to:



- View your account balances and recent activity
- Manage your personal information, account settings, and notifications
- View performance, and research funds
- Order and activate cards for you and your spouse

EZ Receipts *Formerly WageWorks

FSA & Dependent Care FSA

Use this app anytime to:



- Check balances and spending
- Upload receipts for reimbursement
- Scan barcodes to verify product eligibility
- Access live chat support

MOBILE APPS

Put your smartphone to work! Download these free apps from Google Play or Apple Store.

Sonic Boom Wellness



Build better habits with just a few taps

Use this app for on-the-go access to:

- · Wellness Pledge completion tracking
- Log your activities and more

Hinge Health



Your partner for pain relief

Specialized care, personalized for you:

- 1-on-1 support from a physical therapist or health coach
- A care plan designed by your physical therapist for your everyday activities and busy life
- All costs covered, you earned Hinge Health benefits through Murray State University

Omada





- · Connect with your coach via direct messaging
- · Track your meals while your out and about
- Track your steps and physical activity
- Read and complete your weekly lessons
- View your personal progress chart any time



ELIGIBILITY



Eligibility for you and your dependents

You are eligible to participate in the group benefit plans if you are an active full-time employee. For new employees at Murray State, coverage begins on the first day of the month following 28 days of employment. You must enroll within 30 days of your hire date. For example, if your first day of employment is August 15, medical insurance and other voluntary benefits would become effective on October 1. Additionally, you can enroll eligible dependents in medical, dental, vision, group accident, critical illness, hospital indemnity, and emergency medical transportation policies.



Eligible dependents include:

- Your legal spouse, unless they are able to obtain comparable health insurance through their employer.
 Voluntary benefits are not included in this limitation
- Your natural children, legally adopted children, stepchildren and children for whom you assume legal guardianship up to age 26
- Unmarried children aged 26 or older incapable of self-support due to a mental or physical condition incurred prior to age 26

QUALIFYING LIFE EVENTS

The choices you make during your New Hire period or Open Enrollment period cannot be changed until the next Open Enrollment period, unless you experience a qualifying life event. Qualifying life events include changes to your legal marital status, giving birth or adopting a child, a change in you or your spouse's employment status, or your entitlement to Medicare.

If you anticipate any of these changes, please see Human Resources in advance of the event to confirm your eligibility to change your plan coverage(s). If you experience any of these life circumstance changes, you must submit the change on Benefitfocus within 30 days of the event. If you don't you must wait until the next open enrollment to make any changes. Plan changes are not allowed, only coverage level. For example: employee only to family coverage is allowed with a qualifying event as this is a coverage level change. Changing from a PPO to a High-Deductible Health Plan (HDHP) midyear is not allowed as this is a plan change. Premiums will be assessed if covered one day in the month.

Murray State University will also allow a special 60-day enrollment opportunity if you or your eligible dependents either:

- · Lose Medicaid or Children's Health Insurance Program (CHIP) coverage because you are no longer eligible, or
- Become eligible for your state's premium assistance program under Medicaid or Children's Health Insurance Program (CHIP)



Loss of Essential Coverage



Aged off of Parent's Plan



Loss of COBRA Benefits



Change in Citizenship



Marriage or Divorce



Change in Employment Status



Permanent Relocation



Death in Family



Birth, adoption or new dependent



Change in Government Assistance Eligibility



Can you explain the meaning of some of the key terms in this guide?

- · Deductible: a set dollar amount that a person must pay before insurance coverage for medical expenses can begin. They are usually charged on an annual basis.
- · Coinsurance: the money that an individual is required to pay for services after the deductible has been met. It is often a specified percentage of the charges.
- · Copayment (aka Copay): an arrangement where an individual pays a specified amount for various health care services and the health plan or insurance company pays the remainder. The individual must usually pay his/her share when services are rendered. Copayments are usually a set dollar amount.
- · Out-of-pocket Maximum: the total amount paid each year by the member for the deductible, coinsurance, copayments and other covered health care expenses, excluding the premium. After reaching the out-of-pocket maximum, the plan pays 100% of the allowable charges for covered services the rest of that year.

What is Open Enrollment? Open enrollment is the annual opportunity to reflect on your current benefit elections and make any changes for the coming calendar year.

Will I receive new [medical/dental/ vision] ID cards?: New hires will receive medical ID cards 2-3 weeks after you enroll. If you need care before you receive your card, please call Anthem, Delta Dental of KY, or MSU Human Resources (270-809-2146).

Can I have an FSA and HSA at

the same time? If you participate in the Dependent Care FSA, you can also participate in the HSA plan. However, you cannot have a healthcare FSA and an HSA at the same time due to IRS rules that prevent overlapping tax advantages for medical expenses.

How much life insurance do

I need? Many people decide based on an income replacement calculation, between 5 and 10 times the amount of your current income. Think about your personal circumstances: Is yours the sole income in your household? Are there other expenses, such as college tuition, that may arise in the future? Don't forget to include potential medical and funeral costs. Above everything, you want to be sure, your family does not get stuck with bills, debts or expenses that they cannot afford. Depending on your needs, you may want to consider buying supplementary coverage beyond what offers.



I do not plan to make changes to my coverage for 2026. Do I still need to complete the online enrollment process? Yes, this is an active Open Enrollment meaning you must elect each benefit coverage and dependents for all benefits offerings each year. Becoming a member or keeping your Sick Leave Bank membership is part of the Open Enrollment process even if you do not plan on taking Murray State's health insurance. Sick Leave Bank provides a means of obtaining additional sick leave days to avoid loss of compensation.

How much should I contribute to my FSA? Review your out-of-pocket medical expenses and/or dependent daycare expenses from last year.

Can the FSA pay for my health insurance premiums? No.

Why might I want Hospital Indemnity/Accident/Critical Illness coverage if I am enrolled in a major medical plan? This plan are not intended to replace major medical coverage. This plan complement medical plans by eliminating the concern of having to pay for a high deductible or other out-of-pocket expenses in the event of applicable catastrophic events. This plan can serve as an affordable way to fill in a gap in coverage and help reduce your financial risks.



MAKING THE MOST OF YOUR **BENEFITS**

Staying In-Network

Anthem has contracted with a network of providers, including physicians, hospitals and other types of providers. In order to receive the highest level of benefits and pay the least amount out-of-pocket, you need to access care from the providers who have elected to be part of the network. This plan does allow you to seek care from a provider who is not in the network. Just remember that if you make this choice, you will be required to pay a larger portion of the expenses out of your pocket, and the expenses may be subject to the Reasonable and Customary charging pattern for the area. This could also result in a greater out-of-pocket expense for you. We want you to get the most from your healthcare plan.

Your medical network is made up of:

- · convenience care (quick) clinics
- · physicians
- facilities (urgent care, emergency room)
- · nurse practitioners
- · specialists



Privacy Notice: The Murray State University HIPAA Privacy Notice is available on the Human Resources website or in the Human Resources office by calling 270-809-2146

When you see an in-network provider, you will:

- Have lower health care costs for medical services and prescription drugs.
- · Not need to obtain pre-authorization before a procedure such as surgery, your in-network provider will handle this on your behalf.
- · Not have to worry about paying for balance-billed charges and charges above the usual, reasonable, and customary.

· Not have to fill out forms to send to the insurance carrier in order to receive reimbursement, your in-network provider will handle this on your behalf.

How to find an in-network provider:

- · Visit Anthem's website at www.anthem.com
- Call 1-844-278-7612
- Check the Sydney mobile app



HIGHLIGHTS FOR 2026

2026 Plan Year Highlights

- Annual Deductible Changes: Premium Saver HSHP annual deductibles changed to \$3,400 employee only / \$6,800 family.
- Murray State University will continue to offer three medical plan options: Two High-Deductible Health Plans (HDHP) – the Premium Saver Plan and the Balanced Saver Plan – one Preferred Provider Organization Plan (PPO) - the Legacy PPO.
- **NEW!** Wellness Pledge participants will track their progress through the Sonic Boom Wellness platform. Participants will have access to free virtual fitness classes and the option to invite spouses.
- NEW! Wellness Pledge participants will no longer incur penalties for incompletion of the Wellness Pledge. Participants will receive an incentive payment at the end of a successfully completed phase. If both phases are completed successfully, participants will earn \$250.
- Dependent Care Flexible Spending Account (DCFSA) maximum contribution increased to \$7,500.
- Digital therapeutic solutions available for eligible members on the health plan! Hinge Health focuses on musculoskeletal health. Omada focuses on diabetes management, diabetes prevention and hypertension.
- No increase in employee rates in any of Murray State's voluntary plans except a small increase in vision coverage.
- Voya Life is offering \$20,000 guaranteed issue (GI) for current participants in 2026.
- Preventative screenings will continue to be covered at 100%.
- Accident and critical illness voluntary plans offer an additional wellness benefit of up to \$400.





OPEN ENROLLMENT STEPS

1. SAVE THE DATE

October 17th, 2025 - October 31st, 2025

2. REVIEW

Carefully review your current plan and decide on any changes you would like to make for 2026.

3. ENROLL

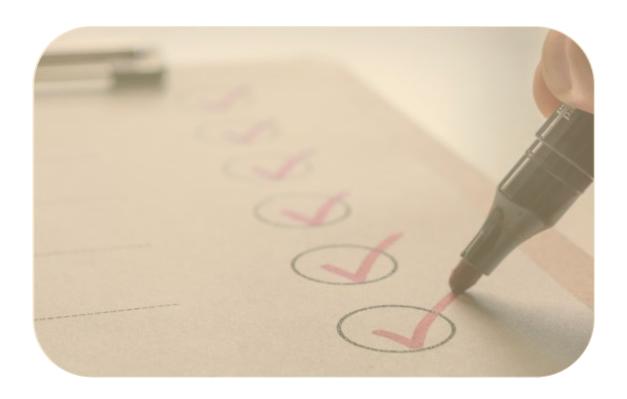
 Log into mygate.murraystate.edu to access the benefitfocus portal on the employee tab in the human resources section, and make your 2026 benefit elections

4. CONFIRM

· After enrolling in your benefits for 2026, take a moment to review and save/print the Benefit Detail Report available in Benefitfocus. Confirm benefits coverage correctly reflects your enrollment choices for yourself and all your dependents.

5. STAY CONNECTED

• Follow Murray State HR on social media and murraystate.edu/hr for up-to-date information.







MEDICAL SUMMARY OF BENEFITS

Anthem

In-Network Medical Plan Highlights				
Plan Type	Premium Saver	Balanced Saver	Legacy PPO	
Employee Deductible	\$3,400	\$1,750	\$600	
Family Deductible	\$6,800	\$3,500	\$1,200	
Employee Out-of-Pocket	\$6,000	\$4,250	\$2,500	
Family Out-of-Pocket	\$12,000	\$8,500	\$5,000	
Preventive Annual Exam	No Charge	No Charge	No Charge	
Primary Care	Deductible then 30% coinsurance	Deductible then 20% coinsurance	\$30 Copay	
Specialist	Deductible then 30% coinsurance	Deductible then 20% coinsurance	\$45 Copay	
Inpatient Hospital	Deductible then 10% coinsurance	Deductible then 10% coinsurance	Deductible then 15% coinsurance	
Outpatient Surgery	Deductible then 10% coinsurance	Deductible then 10% coinsurance	Deductible then 15% coinsurance	
Urgent Care	Deductible then 30% coinsurance	Deductible then 20% coinsurance	\$75 Copay	
Emergency Room	Deductible then 30% coinsurance	Deductible then 20% coinsurance	\$200 Copay	

Anthem Medical Monthly Payroll Deductions						
Plan Type	Premium Saver		Balanced Saver		Legacy PPO	
Contribution	Employee	**MSU	Employee	**MSU	Employee	**MSU
Employee Only	\$35.23	\$788.09	\$141.85	\$760.97	\$243.40	\$758.65
Employee + Spouse	\$163.69	\$1,207.71	\$310.17	\$1,204.36	\$483.34	\$1,200.40
Employee + Child(ren)	\$180.74	\$1,315.04	\$343.49	\$1,311.32	\$546.58	\$1,306.67
Family	\$324.04	\$1,809.77	\$568.16	\$1,804.19	\$908.61	\$1,796.40

^{**}Murray State employer premiums are preliminary.

Procedures regarding enrolling in Murray State's medical plan:

Tobacco Surcharge: Tobacco user will pay a \$55 monthly surcharge in addition to medical premiums. Spousal Coverage: Spouse participation in Murray State University's medical plan is not available if a spouse is employed and is eligible for comparable health insurance coverage through his/her employer's plan.

Comparable coverage if either of the following are true:

Their employer had 50 or more employees or there is a single coverage monthly employee premium available that is less than \$125 per month.



PRESCRIPTION MEDICATION **COVERAGE**

Know Your Rx & Express Scripts



The cost of each prescription is determined by the tier it falls under. The four tiers are Generic, Preferred drugs, Non-Preferred drugs, and Specialty drugs. You can find in-network pharmacies and a list of covered prescriptions at www.kyrx.org. You can also contact Know Your Rx at 1-855-218-5979.

Know Your Rx provides personalized support to assist you in making the most of your prescription benefit. The experts at Know Your Rx work together with Murray State University and Express Scripts, your pharmacy benefits administrator, to ensure the best possible experience for you and your family. With Know Your Rx, you have access to a dedicated team of pharmacists who can assist you in answering questions regarding prescriptions.

Generic Drugs

To get more out of your health care plan, choose Generic drugs when possible. Generic drugs are the chemical equivalent of their more expensive brand name drug counterparts. Even if your doctor prescribes you a brand name drug, you can always ask for the Generic equivalent.

Preferred Drugs

Preferred brand drugs are prescriptions that your pharmacy benefit plan has selected as the most effective and cost efficient to treat certain conditions or illnesses. These brand name drugs are often more expensive than their generic counterpart.

Non-Preferred Drugs

Non-preferred brand drugs treat conditions or illnesses that can also be treated by a preferred brand or generic prescription. These drugs typically have a higher copayment.

Specialty Drugs

Specialty drugs are a category of prescription medications that are typically used to treat complex, chronic, or rare medical conditions. These drugs often require special handling, administration, or monitoring due to their unique characteristics or the conditions, they are intended to treat. Specialty drugs are usually more expensive than traditional medications.

In-Network Medical Plan Highlights				
Plan Type	Premium Saver	Balanced Saver	Legacy PPO	
Tier 1 Drugs: Generic	30% coinsurance after deductible for retail & mail order	20% coinsurance after deductible for retail & mail order	Retail: \$15 Copay Mail Order: \$30 Copay	
Tier 2 Drugs: Preferred	30% coinsurance after deductible for retail & mail order	20% coinsurance after deductible for retail & mail order	Retail: \$35 Copay Mail Order: \$70 Copay	
Tier 3 Drugs: Non-Preferred	30% coinsurance after deductible for retail & mail order	20% coinsurance after deductible for retail & mail order	Retail: \$70 Copay Mail Order: \$140 Copay	
Tier 4 Drugs: Specialty	30% coinsurance after deductible for retail & mail order	20% coinsurance after deductible for retail & mail order	Retail: \$140 Copay Mail Order: \$140 Copay	



HEALTH SAVINGS ACCOUNT

HealthEquity

A Health Savings Account (HSA) allows you to set aside money on a pretax basis to pay for qualified expenses, such as doctor visits, prescriptions, braces, or even Lasik eye surgery, with tax-free dollars.

There is no use it or lose it rule with HSAs. Any remaining balance at the end of the year will roll over into the next plan year. HSAs are also portable. This means that if you were to change jobs or health plans, the money in your account stays with you.

One of the best parts of the HSA is its triple-tax advantage: tax-free deductions when you contribute to your account, tax-free investment earnings, and taxfree withdrawals for qualified medical expenses. You earn tax-free interest on the money in your HSA account. You may also have the option to invest the money in your HSA.

You will receive a card linked to your account to pay for qualified expenses. You may be penalized or taxed if you use your HSA funds to pay for ineligible expenses. A full list of qualified expenses can be found on the IRS website at www.irs.gov (section 213(d)).

Eligibility

- · You are enrolled in the High-Deductible Health Plan (HDHP); and,
- · Are not covered under another medical plan such as Medicare, Tricare or a spouse's medical plan (not an HDHP) which provides similar coverage; and,
- Cannot be claimed as a dependent on another person's insurance policy or tax return.

If you elect the qualified High-Deductible Health Plan (HDHP) / Health Savings Account (HSA) option through Murray State's 125 Cafeteria Plan, Murray State will provide Health Equity with data and information requested and reasonably needed by Health Equity in order to open your Health Equity HSA, including accepting the Health Equity HSA terms and conditions and rate and fee schedule on your behalf and agreeing to receive account statements and other account documents electronically.



2026 IRS Calendar Year Contribution Limits

\$4,400

INDIVIDUAL

\$8,750

FAMILY

\$1,000

AGE 55+ CATCH UP

\$400

EMPLOYEE ONLY MSU CONTRIBUTION

\$800

FAMILY MSU CONTRIBUTION

Notice: IRS guidelines state that an individual cannot contribute to an HSA if they are covered by a healthcare FSA that reimburses medical expenses, even if the FSA is held by another member of the same household. This means that If your spouse or another household member has a healthcare FSA, it may affect your eligibility to contribute to an HSA. However, a Dependent Care FSA, which covers eligible dependent care expenses, does not impact HSA eligibility. It is important to review the types of FSAs in your household to ensure compliance with IRS rules and maintain your HSA benefits.



FLEXIBLE SPENDING ACCOUNT

HealthEquity / EZ Receipts

A Flexible Spending Account, or FSA, is an account set-up by your employer that allows you to pay for medical and dependent care expenses on a pre-tax basis. Pre-tax means before federal, state, and social security taxes are deducted from your paycheck. Refer to the IRS website at www.irs.gov for a full list of qualified and unqualified expenses. Our FSA Administrator is HealthEquity.

Eligibility

You do not need to participate in medical, dental, or vision plans sponsored by Murray State University to contribute to a Flexible Spending Account. IRS guidelines state that an individual cannot contribute to an HSA if they are covered by a healthcare FSA that reimburses medical expenses, even if the FSA is held by another member of the same household. This means that if your spouse or another household member has a healthcare FSA, it may affect your eligibility to contribute to an HSA. However, a Dependent Care FSA, which covers eligible dependent care expenses, does not impact HSA eligibility. It is important to review the types of FSAs in your household to ensure compliance with IRS rules and maintain your HSA benefits.

2026 IRS Calendar Year Contribution Limits



\$3,300

HEALTH CARE FSA

\$7,500

DEPENDENT CARE FSA

\$660

MAXIMUM CARRYOVER

There are 2 types of FSA's offered:

Healthcare FSA

- Access to entire amount of money you set aside for the plan year on the first day of the plan
- If you were enrolled in a Healthcare FSA in 2025 and enroll in 2026, you can use 2025 dollars to pay 2025 plan year claims through May 31, 2026. 2026 claims CANNOT be paid with 2025 contributions. After May 31, 2026, you are allowed to carry over up to \$660 to pay future claims. You have until May 31 of the following year to pay plan year claims. After that point, you can carry over up to \$660 to pay future claims. If you had an FSA in 2025 and elect an HSA or waive the FSA in 2026, you are not eligible for the \$660 carryover.
- You will receive a debit card that can be used at your doctor's office or pharmacy for qualified expenses.

Dependent Care FSA

- Use pre-tax income for dependent care for children up to age 13 who are being cared for while you or your spouse are working or seeking employment
- Eligible dependents could also include a spouse or other IRS dependent who is mentally or physically disabled.
- Qualified expenses include daycare and at-home care services. Ineligible expenses include tuition for kindergarten or private schools, sports camps, or overnight camps.

Notice: According to IRS guidelines, if you enroll in one of the HSA HDHP plans, you cannot also enroll in Murray State's FSA plan. If your spouse works at Murray State and elects' coverage from the PPO plan; the spouse cannot elect the FSA. Additionally, regardless of where the spouse is employed; the IRS does not allow the family to have FSA and HSA at the same time. Employees should consult with their tax advisors for additional information.



With the GeoBlue® mobile app, travelers have convenient access to the best local doctors, hospitals and resources anywhere in the world.

Features



Provider Finder

Search providers for medical, dental, or mental health care and map them using GPS technology.*



Direct Pay

Arrange Direct Pay for future appointments to secure cashless access to care.



Guarantees of Payment

Access issued guarantees of payment to view and share with doctors and hospitals.



Medicine Equivalents

Find country-specific equivalents for prescription and overthe-counter medications.



Medical Translations

Translate medical terms and phrases for many symptoms and situations; use the audio feature to play the translation.



Eligibility

Display an ID Card on a smart phone and email/fax a copy directly to a provider's office.



News & Safety

View country or city profiles on crime, terrorism and natural disasters.

Get Started



Download the app and login using your username and password from **geo-blue.com** or register as a new user through the app using the Group Access Code located in your GeoBlue member guide.

Questions? Please email customerservice@geo-blue.com or call +1.855.282.3517.

GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of Blue Cross and Blue Shield Association and is made available in cooperation with Blue Cross and Blue Shield companies in select service areas. Coverage is provided under insurance policies underwritten by 4 Ever Life Insurance Company, Oakbrook Terrace, IL, NAIC #80985, Blue Cross Blue Shield Global is a brand owned by Blue Cross Blue Shield Association.







RACER WELLNESS 2026

Racer Wellness Mission

The mission of Murray State University's Racer Wellness program is to encourage, support, and assist employees in taking a proactive approach to improve their health and well-being.

Health Fair and Health Education

Racer Wellness offers a Health Fair and educational opportunities. The fall Employee Health and Benefits Fair will be held on October 23rd, 2025, from 10:30 am - 1:00 pm in the Curris Center Ballroom. The Fair offers many different screenings and opportunities to talk with healthcare professionals. There will be different educational opportunities that will be offered to employees year-round.

Take the Wellness Pledge and earn \$250

Starting in 2026, penalties will be removed from the Wellness Pledge. Incentive payments will be received at the end of each phase upon successful completion.

If Phase 1 is not completed, participants will not move to Phase 2 and will not receive the \$150 incentive payment. If Phase 2 is not completed, participants will not receive the \$100 incentive payment. To earn the \$250 employees must complete Phase 1 before June 1, 2026, and Phase 2 before October 1, 2026. Participation in the Pledge is offered annually during the Open Enrollment period. Participants must elect Murray State health insurance for Wellness Pledge screenings.

EARN \$250 INCENTIVE UPON COMPLETION OF PHASE 1 AND PHASE 2

PHASE 1: JANUARY 1ST, 2026 - MAY 31ST, 2026

- Complete and/or attend 4 Racer Wellness sanctioned events, activities, and screenings
- Phase 1 Deadline: May 31st, 2026
- \$150 paid in June 2026 for successful completion of Phase 1* (10/11 month pay EEs will receive Phase 1 payment in August 2026)

COMPLETE PHASE 1 BEFORE JUNE 1, 2026, TO MOVE TO PHASE 2

PHASE 2: JUNE 1ST, 2026 - SEPTEMBER 30TH, 2026

- Complete and/or attend 2 Racer Wellness sanctioned events and activities
- Phase 2 Deadline: September 30th, 2026
- \$100 paid in October 2026 for successful completion of Phase 2*

COMPLETE PHASE 2 BEFORE OCTOBER 1, 2026

 Complete details are at murraystate.edu/racerwellness Reasonable alternatives and accommodations will be made available in compliance with HIPAA and ADA.

Sonic Boom Wellness



NEW TO THE WELNESS PLEDGE

Racer wellness is excited to introduce our new employee wellness platform, Sonic Boom Wellness, bringing a fresh new resource to health and well-being for our faculty and staff. Wellness Pledge participants will access the Sonic Boom Wellness platform through the Employee Tab on myGate.

All Wellness Pledge information and submissions will take place through Sonic Boom Wellness in January 2026. Access to Sonic Boom Wellness is contingent upon successful completion of Pledge Phases.

^{*}Phase 1 incentive payment: Participants must be employed in June 2026 to receive payment.

^{*}Phase 2 incentive payment: Participants must be employed in October 2026 to receive payment.



SUSAN E. BAUERNFEIND WELLNESS CENTER ACCESS PROGRAM

Employees who have taken the 2026 Wellness Pledge are also eligible to participate in this program, which allows access to the Wellness Center.

- Must be a Wellness Pledge participant to be eligible this program is NOT part of the Wellness Pledge programming.
- Must meet minimum number of visits to maintain membership:
 - January 1, 2026 May 31, 2026: 40 visits
 - o August 1, 2026 September 30, 2026: 15 visits
- The membership fee is paid by Racer Wellness.
- This is a taxable employee benefit.

EMPLOYEE ASSISTANCE PROGRAM

Employee Assistance Program (EAP) is a voluntary, confidential program that provides professional help to employees and their household members who may need assistance to discuss and find solutions for issues such as:

- Emotional challenges
- Stress & Anxiety
- Relationship concerns
- Alcohol/drug problems
- Legal matters
- Financial management



The EAP program offers a variety of resources ranging from legal and financial services, legal document templates, eldercare and childcare resources, webinars, and short-term counseling. Employees and household members can receive six counseling sessions per issue, per year. In addition to face-to-face counseling sessions, EAP telecounseling services are available.

Employees also have access to an EAP Work-Life website portal with interactive tools and resources that promote overall well-being.

This benefit is available at no cost. Individuals may contact the EAP by calling Wayne Corporation at 502-451-8262,1-800-441-1EAP (1327), or by visiting www.waynecorp.com.



EMERGENCY MEDICAL MASA TRANSPORTATION (MTS)

MASA

MTS Emergent Plus: Full plan details available within Benefitfocus

- Masa provides the following coverages: emergency air ambulance coverage, emergency ground ambulance coverage, hospital to hospital ambulance coverage, and repatriation to hospital near home coverage (when arranged by MASA).
- These services are available within the United States and Canada, regardless of whether the provider is in or out of a given healthcare benefits network.
- The \$14.00 monthly premium covers employee, spouse, and eligible dependents under the age of 26.
- Murray State's health insurance plan includes coverage for emergency medical transportation. MASA provides additional coverage in the event that an emergency medical transportation provider is not in network with Murray State's plan. MASA does not require participants to be enrolled in Murray State's health insurance plan.
- If services are needed MASA participants will be required to meet their health insurance's annual deductible before MASA benefits will be applied.
- The maximum benefits amount pays a maximum of \$20,000 per event for up to two (2) events per 12-month period for emergency air ambulance and emergency ground ambulance.
- MASA will cover out of pocket expenses for hospital-to-hospital ambulance after applying primary insurance benefits.
- Total costs are paid for repatriation to hospital near home coverage when MASA MTS arranges the transportation service.

Sick Leave Bank – Annual Membership Enrollment Required

The purpose of the Sick Leave Bank is to provide eligible members additional sick leave days to avoid the loss of compensation due to a catastrophic illness and or injury of the employee. This voluntary benefit is available to regular full-time and regular part-time members who have exhausted all accumulated sick and vacation leave. A sick leave balance of six or more days is required at the time of your initial participation, and new members must immediately contribute 1-3 days to your bank.

Donated days, which become the property of the bank, may not be designated for any individual use or reclaimed by the donated employee.



Hinge Health gives you the tools and support needed to manage back and joint pain, recover from injuries, prepare for surgery and stay healthy and pain free. The program provides you with an assessment and customized care plan for preventive, acute or chronic needs.

To learn more or register visit hinge.health/murraystateu or call (855) 902-2777.

omada

Omada focuses on navigating small lifestyle and behavior changes to result in weight loss, increased activity and improved diabetes and hypertension control. Health plan participants may qualify to enroll with Omada if criteria is met for diabetes prevention, Type I and Type II diabetes management and hypertension management.

To learn if you are eligible go to express-scripts.com/healthsolutions or call (888)409-8687.

Programming to fit your lifestyle!

Digital Therapeutics offer a customized online solution to improve your overall wellbeing. Murray State has partnered with Hinge Health and Omada to provide therapeutics for faculty and staff enrolled in the health plan, including spouses and dependents over 18.

This benefit is provided to you at no cost.



Delta Dental of KY

Murray State University offers employees and their dependents dental coverage through Delta Dental of KY. Although you can use an out-of-network dentist, you will save the most money out of you pocket by using Delta Dental dentists who have agreed to give you negotiated rates. To find out what dentists are in-network, call 1-800-955-2030 or visit the Delta Dental KY website at www.deltadentalky.com.

In-Network Dental Plan Highlights				
Plan Type	Core	Buy-Up		
Annual Maximum (per person)	\$750	\$1,000		
Deductible (individual / family)	\$0 / \$0	\$50 / \$150		
Preventative Services	Covered at 100%	Covered at 100%		
Minor Services	You pay 20%	Deductible then you pay 20%		
Major Services (12 month waiting period)	You pay 75%	Deductible then you pay 50%		
Orthodontia Benefit (through age 18)	Not covered	50%		
Orthodontia Lifetime Maximum (per person)	Not covered	\$1,000		

Delta Dental of KY Monthly Dental Payroll Deductions				
Plan Type Core Buy-Up				
Employee Only	\$18.72	\$28.89		
Employee + Dependent(s)	\$75.54			





Minimize your out-of-pocket expenses for dental care by asking your dentist for a pretreatment estimate before you agree to receive any prescribed major treatment. Your dentist may be able to present alternative treatment options that will lower your share of the bill while still meeting your basic dental care needs.

This page is a summary only. For a complete list of benefit restrictions, limitations and exclusions, please refer to your Certificate of Coverage.

VISION

Anthem



Whether you have glasses, contacts, or even 20/20 vision, Murray State University vision insurance offers a comprehensive vision benefit provided by Anthem. Vision insurance is the key to maintaining good eye health, as annual exams may detect early warning signs of various health conditions.

You can get contact lenses once every 12 months, but in lieu of prescription lenses - meaning it is one or the other not both. Remember in order to maximize your benefit for frames and contact lenses you must utilize the entire allowance at once. For example, if you order only \$100 worth of contacts, you will forfeit the remaining \$50. If you later try to order \$50 worth of contacts, that portion of the allowance will no longer be available.

Reminder: Murray State University offers one routine adult vision exam covered at 100% under your medical plan. This exam includes refraction, dilation, and a visual acuity test, it will not cover materials or any additional services.

When searching for vision providers on the Anthem website it will default to providers in your vision network. To view care providers in your medical network, update the plan network filter to Medical Network.

In-Network Vision Plan Highlights			
Plan Type Anthem Blue View Vision			
Routine Eye Exam (once every 12 months)	\$10 Copay		
Prescription Lenses (once every 12 months)	\$10 Copay		
Frames (once every 24 months)	\$100 Allowance, then 20% off any remaining balance		
Contact Lenses (in lieu of glasses, once every 12 months)	\$150 Allowance		

Anthem Vision Monthly Premium			
Plan Type	Anthem Blue View Vision		
Employee Only	\$7.47		
Employee + Dependent(s)	\$13.80		
Employee + Spouse	\$14.64		
Employee + Family	\$20.97		

This page is a summary only. For a complete list of benefit restrictions, limitations and exclusions, please refer to your Certificate of Coverage.



This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

The payment you get isn't based on the size of your medical bill.

HEALTH INSURANCE

- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- Visit HealthCare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- · For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.



GROUP ACCIDENT



Voya

For additional information regarding all Voya plans, please visit https://presents.voya.com/EBRC/Home/MSU. See full plan details for more information

Accidents happen. Accident Insurance can help.

You can't always avoid accidents, but you can protect yourself and your family from accident-related costs that may strain your budget. A Group Accident plan pays a cash benefit directly to you if you sustain a covered injury and require treatment or hospital care.

Voya Accident Monthly Premium			
Employee Only	\$8.52		
Employee + Spouse	\$14.42		
Employee + Child(ren)	\$16.24		
Family	\$22.14		

Features of Accident Insurance include:

Guaranteed issue: No medical questions or test are required for coverage.

Flexible: You can use the benefit payments for any purpose you like.

Portable: If you leave your current employer or retire, you can take your coverage with you.

In addition, the plan also pays an annual wellness benefit of \$100 per adult and \$50 per child on the plan, for a wellness exam. There is an annual maximum of \$200 for all children combined.

GROUP HOSPITAL INDEMNITY

Voya

Hospitalization is unplanned.

A trip to the hospital can be stressful, and so can the bills. Even with major medical insurance, you may still be responsible for copayments, deductibles and other out-of-pocket expenses. A Hospital Indemnity plan pays a cash benefit directly to you in the event you or a covered family member are admitted to the hospital. The cash benefit you receive can be used to assist in paying expenses associated with a hospital stay.

Voya Hospital Indemnity Monthly Premium			
Employee Only	\$18.19		
Employee + Spouse	\$36.30		
Employee + Child(ren)	\$27.10		
Family	\$45.21		

Features of Hospital Indemnity Insurance include:

Guaranteed issue: No medical questions or test are required for coverage.

Flexible: You can use the benefit payments for any purpose you like.

Payroll deductions: Premiums are paid through convenient payroll deductions.

Affordable coverage: Rates are typically lower when you purchase coverage through your employer.

Portable: If you leave your current employer or retire, you can take your coverage with you.

This page is a summary only. For a complete list of benefit restrictions, limitations and exclusions, please refer to your Certificate of Coverage.



SHORT-TERM DISABILITY

Voya

Murray State offers benefit-eligible employees the opportunity to purchase short-term disability income benefits through Voya. In the event you become disabled from a non-work-related injury or sickness, disability income benefits can represent a source of income. Short-term disability is also available for maternity leave. You are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits or while receiving paid leave such as sick leave pay or sick leave bank pay.

Please refer to the table for a brief description of the benefits. Per-pay cost is based on your current age of the effective date of coverage and will be calculated during the online enrollment process. Evidence of insurability may be required if electing for the first time.

Voya Short-Term Disability Summary of Benefits			
Weekly Benefit Percentage	60% of base salary		
Maximum Weekly Benefit Amount \$1,000.00			
Accident Elimination Period	1 day		
Sickness Elimination Period	8 days		
Maximum Benefit Duration	13 weeks		

Note: Employees who have been participants for five or more years in the Kentucky Employees Retirement System (KERS) or Teachers' Retirement System (TRS) are eligible for long-term disability coverage.

GROUP CRITICAL ILLNESS

Voya

Critical Illness Insurance pays a lump-sum benefit if you are diagnosed with a covered illness or condition on or after your coverage effective date. You also have the option to elect additional coverage. Critical Illness Insurance is a limited benefit policy. It is not health insurance and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

Features of Critical Illness Insurance include: 65.

Guaranteed issue: No medical questions or test are required for coverage.

Flexible: You can use the benefit payments for any purpose you like.

Payroll deductions: Premiums are paid through convenient payroll deductions.

Portable: If you leave your current employer or retire, you can take your coverage with you.

In addition, the plan also pays an annual wellness benefit of \$100 per adult and \$50 per child on the plan, for a wellness exam. There is an annual maximum of \$200 for all children combined.

	Voya orthoar fillicoo monthly i formani				
	Employee Only		Employee	+ Spouse	
	Non-Tobacco Rates	Tobacco Rates	Non-Tobacco Rates	Tobacco Rates	
>30	\$7.80	\$10.20	\$11.90	\$15.60	
30-39	\$10.20	\$14.60	\$15.75	\$22.60	
40-49	\$18.50	\$28.30	\$28.70	\$43.95	
50-59	\$31.30	\$49.80	\$48.95	\$78.05	
60-64	\$42.50	\$70.20	\$66.20	\$109.50	
65-69	\$58.80	\$89.20	\$90.20	\$136.75	
70+	\$76.30	\$115.10	\$116.70	\$175.80	

Vova Critical Illness Monthly Premium

	Employee + Child(ren)		Employee + Family	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
	Rates	Rates	Rates	Rates
>30	\$10.10	\$12.50	\$14.20	\$17.90
30-39	\$12.50	\$16.90	\$18.05	\$24.90
40-49	\$20.80	\$30.60	\$31.00	\$46.25
50-59	\$33.60	\$52.10	\$51.25	\$80.35
60-64	\$44.80	\$72.50	\$68.50	\$111.80
65-69	\$61.10	\$91.50	\$92.50	\$139.05
70+	\$78.60	\$117.40	\$119.00	\$178.10

Wellness Benefit

At a glance



For employees of Murray State University enrolled in Critical Illness Insurance, and/or Accident Insurance.

What is the Wellness Benefit?

The Wellness Benefit is a rider that is included with your Accident and/or Critical Illness Insurance coverage. It provides an annual benefit payment if you complete a health screening test, whether or not there is any out-of-pocket cost to you. You are eligible to receive one annual benefit, regardless of how many screening tests you may complete. You may also receive a benefit for your covered spouse and/or children if they complete a health screening test.

How can the Wellness Benefit help?

Regular health screenings increase the chance of a positive outcome when serious illnesses are detected early. The Wellness Benefit encourages you to get regular health screenings. The benefit you receive for your health screening test can be used to help pay for the cost of the test or however you like.

What types of health screening tests are eligible?

Health screening tests include but are not limited to:

- Blood test for triglycerides
- Pap test
- Flexible sigmoidoscopy
- CEA (blood test for colon cancer)
- Bone marrow testing
- Serum cholesterol test for HDL & LDL levels
- Hemoccult stool analysis
- Serum protein electrophoresis (myeloma)
- Breast ultrasound
- Chest x-ray
- Mammography
- Colonoscopy
- CA 15-3 (breast cancer)
- Stress test on bicycle or treadmill
- Fasting blood glucose test
- PSA (prostate cancer)
- Routine eye exam
- Routine dental exam
- Well child/preventive exams through age 18

Your employer provides a semi-annual, optional wellness fair screening. If this screening is completed, it qualifies for the wellness benefit.

How much does it cost?

The Wellness Benefit is automatically included with your Critical Illness Insurance and/or Accident Insurance coverage at no additional cost to you.

What is my Wellness Benefit amount?

	Accident Insurance	Critical Illness Insurance
You (employee)	\$100	\$100
Spouse	\$100	\$100
Child	\$50 with a maximum of \$200 per year	\$50 with a maximum of \$200 per year

ReliaStar Life Insurance Company, a member of the Voya® family of companies





BASIC LIFE AND AD&D



Voya

Murray State cares about your financial well-being and that of your family. That's why we provide \$10,000 of basic term life insurance and \$10,000 of accidental death and dismemberment (AD&D) coverage at no cost to all eligible full-time employees. This employer-paid benefit offers important financial protection by providing a cash benefit to your beneficiary in the event of your passing. Life insurance is a key part of a strong financial plan, helping to protect your family's future and reduce financial stress during difficult times.

SUPPLEMENTAL LIFE AND AD&D

Voya

Supplemental Life and AD&D insurance is available to enhance your employer-paid life benefit. The maximum coverage you can purchase is the lesser of five (5) times your earnings or \$500,000. You can buy this coverage in increments of \$10,000, with a guaranteed issue amount of \$250,000 if you are a new hire enrolling for the first time. Regular full-time employees can purchase additional supplemental life coverage but must complete evidence of insurability. The 2026 rate for Supplemental Life and AD&D is \$0.31 per \$1,000. For example, a \$40,000 Supplemental Life and AD&D policy would cost \$12.40 per month.

Benefits will reduce by 50% at age 70. All benefits will terminate when employment ends unless you chose to continue coverage under the portability or conversion options.

Voya Supplemental Life and AD&D Summary of Benefits					
	Benefit Amount	Guarantee Issue*			
Employee Life and AD&D Benefit	\$10,000 to \$500,000 in increments of \$10,000	\$250,000			
Age Reduction	50% at age 70				

- Premiums for the Basic Term Life and AD&D are paid by Murray State University and are not taxed.
- Premiums for the Supplemental Term Life and AD&D are paid by the employee and up to the first \$40,000 will be deducted on a pretax basis.

Accidental Death & Dismemberment

Accidental Death & Dismemberment (AD&D) pays a benefit to you or your beneficiary, separate from the life insurance benefit, if you are severely injured or die as the result of a covered accident. This coverage is part of the Group Term Life Insurance offered through Murray State University.

Reminder: Please review your beneficiary information and update it if necessary. You can make changes to your beneficiaries at any time throughout the year using Benefitfocus.



Employees in positions that do not require a Bachelor's Degree will participate in the following retirement options:

Full-time and certain part-time employees of Murray State University are required to participate in one of the following retirement plans depending on the employment category. Employees may also choose to supplement their retirement savings by contributing to a 403(b)-retirement plan on a voluntary basis.

Kentucky Employee Retirement System (KERS/KPPA)

Employees in positions that do not require a Bachelor's Degree.

Kentucky Employees Retirement System-Hazardous (KERS-HAZ/KPPA)

Police Department officers and other qualified employees.

For more information regarding KERS and KERS-Haz, please visit the website at kyret.ky.gov.

Employees in positions requiring a minimum of a Bachelor's Degree have the following options:

Teachers' Retirement System- (TRS)

Full-time faculty and staff meeting the eligibility requirements. For more information regarding TRS please visit the website at <u>trs.ky.gov</u>.

Optional Retirement Plan- (ORP)

This is available to full-time faculty and staff who would otherwise participate in TRS. For more information regarding the ORP plan, please visit the Murray State Human Resource's website at murraystate.edu/HR.

All employees are eligible to establish a Voluntary Supplemental Retirement account

Voluntary Supplemental Retirement

Supplemental 403(b) plans - for employees wishing to make a voluntary contribution into a supplemental retirement plan. Please contact Human Resources at 270-809-2146 for the supplemental retirement vendor contact information.

Important Benefit Notifications

Benefit Notifications may be found on the Murray State Human Resource's site at murraystate.edu/HR.

- · HIPAA Privacy Notice
- New Health Insurance Marketplace Coverage Options and Your Health Coverage
- Introduction to New Health Insurance Marketplace Coverage Options
- Important Notice from Murray State University about your prescription drug coverage and Medicare
- · Women's Health and Cancer Rights Act
- · Newborn's Act Disclosure
- Medicaid and Children's Health Insurance
 Program (CHIP) Offer Free or Low-Cost Coverage
 to Children and Families
- HIPAA Special Enrollment Notice
- Kentucky Pregnant Workers Act



*This guide is designed to assist you in making benefit election choices and represents only a brief summary of available plans. This booklet is not intended as an official interpretation of the plans. For more detailed information, please refer to the Certificate of Coverage or Summary Plan Description. Should any question arise, the Certificate of Coverage or Summary Plan Description will be the final authority in determining the benefits provided by your plans. Murray State University reserves the right to modify, amend or terminate the plan at any time.